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Bib Data Sheet

CONFIRMATION NO. 8096

SERIAL NUMBER 09/296,217	FILING DATE 04/22/1999 RULE	CLASS 507	GROUP ART UNIT 1743	ATTORNEY DOCKET NO. 23267/15D1	
APPLICANTS BOYCE D. BURTS, LAFAYETTE, LA;					
** CONTINUING DATA ***** THIS APPLICATION IS A DIV OF 08/962,215 10/31/1997 PAT 6,016,879 <i>slc</i>					
** FOREIGN APPLICATIONS ***** <i>now slc</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 05/12/1999					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>slc</i> Allowance Verified and Acknowledged <i>slc</i> Examiner's Signature Initials		STATE OR COUNTRY LA	SHEETS DRAWING	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
ADDRESS J.M. (MARK) GILBRETH GILBRETH & ASSOCIATES, P.C. P.O. BOX 2428 BELLAIRE, TX 77402-2428					
TITLE WELL LOST CIRCULATION ADDITIVE, LOST CIRCULATION TREATMENT FLUID MADE THEREFROM, METHOD OF MINIMIZING LOST CIRCULATION IN A SUBTERRANEAN FORMATION					
FILING FEE RECEIVED 380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

SERIAL NUMBER 09/296,217	FILING DATE 04/22/99	CLASS 507	GROUP ART UNIT 1721	ATTORNEY DOCKET NO. 23267/15D1
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APPLICANT

BOYCE D. BURTS, LAFAYETTE, LA.

CONTINUING DOMESTIC DATA***

VERIFIED THIS APPLN IS A DIV OF 08/962,215 10/31/97

SLC

371 (NAT'L STAGE) DATA***

VERIFIED

SLC

FOREIGN APPLICATIONS***

VERIFIED

SLC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/12/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <u>SLC</u> Examiner's Initials _____	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY LA	SHEETS DRAWING 0	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
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ADDRESS	GILBRETH & STROZIER ASSOCIATES, P.C. P O BOX 61305 HOUSTON TX 77208-1305
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TITLE	WELL LOST CIRCULATION ADDITIVE, LOST CIRCULATION TREATMENT FLUID MADE THEREFROM, METHOD OF MINIMIZING LOST CIRCULATION IN A SUBTERRANEAN FORMATION
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FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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